

**Imaging/Radiology Services
Frequently Asked Questions (FAQs)
Highmark Delaware Members**

1. Where are Highmark Delaware's in-network non-hospital affiliated freestanding facilities in Delaware?

Members can view the list of Highmark Delaware's in-network non-hospital affiliated freestanding facilities in Delaware on [SBO's website](#).

2. Where are Highmark Delaware's in-network non-hospital affiliated freestanding facilities outside of Delaware?

Highmark members will need to search for out-of-state, in-network non-hospital affiliated freestanding facilities using [Highmark's online Provider Search Tool](#).

3. Do the copay differentials for site of care effective July 1, 2018 include pediatric tests?

Yes, the copays effective July 1, 2018 as outlined on [SBO's website](#) apply to all member tests, including pediatric tests.

4. Do the copay differentials for site of care effective July 1, 2018 include inpatient tests?

No, the copays effective July 1, 2018 as outlined on [SBO's website](#) only apply to outpatient tests.

5. If I am a breast cancer survivor, are my mammograms considered preventive or diagnostic (i.e. will I be charged a copay)?

For mammograms billed as diagnostic, members will be charged a copay if using an in-network, hospital affiliated facility. Members who choose to have these services at an in-network non-hospital affiliated freestanding facility will not. Mammograms billed as routine (including 3D effective July 1, 2018) and following the preventive schedule guidelines, will be covered at 100%. If you are having the mammogram annually, ask your physician to code as preventive.